Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 1 of 25

(Official Form 1) (12/03)

FORM B1 United States Bankruptcy Northern District of Illinoi	Voluntary Petition				
Name of Debtor (if individual, enter Last, First, Middle): Johnson, Bobby J	Name of Joint Debtor (Spouse) (Last Johnson, Elna A	First, Middle):			
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):	All Other Names used by the Joint E (include married, maiden, and trade				
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all):  xxx-xx-6949	Last four digits of Soc. Sec. No. / Cor (if more than one, state all):				
Street Address of Debtor (No. & Street, City, State & Zip Code): 3125- 19th Street Rockford, IL 61109	Street Address of Joint Debtor (No. & 3125- 19th Street Rockford, IL 61109				
County of Residence or of the Principal Place of Business: Winnebago	County of Residence or of the Principal Place of Business: Winn	ebago			
Mailing Address of Debtor (if different from street address): same	Mailing Address of Joint Debtor (if a same	different from street address):			
Location of Principal Assets of Business Debtor (if different from street address above):					
Venue (Check any applicable box)  ■ Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180  □ There is a bankruptcy case concerning debtor's affiliate, general principal place.	days than in any other District.				
Type of Debtor (Check all boxes that apply)  ■ Individual(s) □ Railroad □ Corporation □ Stockbroker □ Partnership □ Commodity Broker □ Other □ □ Clearing Bank	Chapter or Section of Bank the Petition is File Chapter 7	d (Check one box) pter 11 ☐ Chapter 13 pter 12			
Nature of Debts (Check one box)  ■ Consumer/Non-Business □ Business	Filing Fee (Cl				
Chapter 11 Small Business (Check all boxes that apply)  ☐ Debtor is a small business as defined in 11 U.S.C. § 101  ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)	ents (Applicable to individuals only.) For the court's consideration e to pay fee except in installments. In No. 3.				
Statistical/Administrative Information (Estimates only)  ■ Debtor estimates that funds will be available for distribution to unsecured creditors.  □ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					
Estimated Number of Creditors 1-15 16-49 50-99 100-15					
\$50,000 \$100,000 \$500,000 \$1 million \$10 million \$50 m	0,001 to \$50,000,001 to More than illion \$100 million				
\$50,000 \$100,000 \$500,000 \$1 million \$10 million \$50 m	0,001 to \$50,000,001 to More than illion \$100 million \$100 million				

(Official Form Cases) 5-73844 Doc 1 Filed 08/01/05	Entered 08/01/05 10:45	:03 Desc Main
Voluntary Petition (This page must be completed and filed in every case)	N <b>age 12ിത</b> r2 <b>5</b> Johnson, Bobby J Johnson, Elna A	FORM B1, Page 2
Prior Bankruptcy Case Filed Within Last 6	•	ional sheet)
Location Where Filed: - None -	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)
Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:
Sign	atures	
Signature(s) of Debtor(s) (Individual/Joint)  I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand	Exi (To be completed if debtor is require	-
the relief available under each such chapter, and choose to proceed under chapter 7.	Ex	hibit B
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X /s/ Bobby J Johnson Signature of Debtor Bobby J Johnson		nat [he or she] may proceed under United States Code, and have
X /s/ Elna A Johnson	X _/s/ WILLIAM L. BALSLEY	August 1, 2005_
Signature of Joint Debtor Elna A Johnson	Signature of Attorney for Debto WILLIAM L. BALSLEY	r(s) Date
Telephone Number (If not represented by attorney)		hibit C
August 1, 2005	Does the debtor own or have posses a threat of imminent and identifiable safety?	
Date	☐ Yes, and Exhibit C is attached	I and made a part of this petition.
Signature of Attorney  X /s/ WILLIAM L. BALSLEY	■ No	
Signature of Attorney for Debtor(s)  WILLIAM L. BALSLEY  Printed Name of Attorney for Debtor(s)  Balsley & Dahlberg, LLP	I certify that I am a bankruptcy petit § 110, that I prepared this document provided the debtor with a copy of t	for compensation, and that I have
Firm Name 5130 North Second Street	Printed Name of Bankruptcy Pe	tition Preparer
Loves Park, IL 61111	Social Security Number (Require	red by 11 U.S.C.§ 110(c).)
Address Email: www.balsleylawoffice.com (815) 877-2593 Fax: (815) 877-7965		
Telephone Number August 1, 2005	Address	
Date	Names and Social Security num prepared or assisted in preparing	bers of all other individuals who this document:
Signature of Debtor (Corporation/Partnership)  I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11,	If more than one person prepare	ed this document, attach additional
United States Code, specified in this petition.	l	oriate official form for each person.
X	Signature of Bankruptcy Petitio	n Preparer
Printed Name of Authorized Individual	Date	
Title of Authorized Individual	A bankruptcy petition preparer's provisions of title 11 and the Fe Procedure may result in fines of U.S.C. \$ 110, 18 U.S.C. \$ 156	deral Rules of Bankruptcy
Date	U.S.C. § 110; 18 U.S.C. § 156.	

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 3 of 25

## **United States Bankruptcy Court Northern District of Illinois**

In re	Bobby J Johnson,		Case No		
	Elna A Johnson				
_		Debtors	, Chapter	13	_

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

			AM	OUNTS SCHEDULED	
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	128,000.00		
B - Personal Property	Yes	3	17,050.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		139,000.00	
E - Creditors Holding Unsecured Priority Claims	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		35,750.40	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,036.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,584.00
Total Number of Sheets of ALL S	chedules	15			
	Т	otal Assets	145,050.00		
			Total Liabilities	174,750.40	

### Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 4 of 25

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	

#### Debtors

#### SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. (See Schedule D.) If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Real estate located at: 3125- 19th Street Rockford IL	Fee simple	J	124,000.00	120,000.00
2 vacant lots located near Wisconsin Dells	Fee simple	J	4,000.00	0.00

Sub-Total > 128,000.00 (Total of this page)

Total > 128,000.00

### Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 5 of 25

In re	Bobby J Johnson,	Case No	
	Elna A Johnson		

#### Debtors

#### SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

 $Do \ not \ list \ interests \ in \ executory \ Contracts \ and \ unexpired \ leases \ on \ this \ schedule. \ List \ them \ in \ Schedule \ G \ - \ Executory \ Contracts \ and \ Unexpired \ Leases.$ 

	Type of Property	N O Description and Location of Proper E	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	National City Bank/ checking	J	50.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Misc. household goods and furnishings	J	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothing and personal items	J	500.00
7.	Furs and jewelry.	X		
8.	Firearms and sports, photographic, and other hobby equipment.	X		
9.	Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.	Life Insurance Policy- no cash value	J	0.00
			Sub-Tota (Total of this page)	al > 2,550.00

<sup>2</sup> continuation sheets attached to the Schedule of Personal Property

## Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 6 of 25

In	n re Bobby J Johnson, Elna A Johnson			Case No.			
		Debtors  SCHEDULE B. PERSONAL PROPERTY  (Continuation Sheet)					
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption		
10.	. Annuities. Itemize and name each issuer.	Х					
11.	. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	Intere	st in Profit Sharing Plan	W	Unknown		
12.	. Stock and interests in incorporated and unincorporated businesses. Itemize.	Χ					
13.	. Interests in partnerships or joint ventures. Itemize.	Х					
14.	. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X					
15.	. Accounts receivable.	Χ					
16.	. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X					
17.	. Other liquidated debts owing debtor including tax refunds. Give particulars.	Х					
18.	. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X					
19.	. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X					
				Sub-Tota	al > 0.00		
			(	Total of this page)			

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

### Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 7 of 25

In r	e Bobby J Johnson, Elna A Johnson		C	ase No			
	Debtors  SCHEDULE B. PERSONAL PROPERTY  (Continuation Sheet)						
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption		
;	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х					
:	Patents, copyrights, and other intellectual property. Give particulars.	Х					
	Licenses, franchises, and other general intangibles. Give particulars.	X					
	Automobiles, trucks, trailers, and other vehicles and accessories.		Pontiac Montana Chevrolet Pickup Truck	J H	12,000.00 2,500.00		
24.	Boats, motors, and accessories.	Χ					
25.	Aircraft and accessories.	Χ					
	Office equipment, furnishings, and supplies.	Χ					
	Machinery, fixtures, equipment, and supplies used in business.	X					
28.	Inventory.	Χ					
29.	Animals.	Χ					
	Crops - growing or harvested. Give particulars.	X					
	Farming equipment and implements.	Χ					
32.	Farm supplies, chemicals, and feed.	Χ					
	Other personal property of any kind not already listed.	Х					

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Sub-Total >

Total >

(Total of this page)

14,500.00

17,050.00

In re	Bobby J Johnson,	Case No.
	Fina A Johnson	

Debtors

### SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: [Check one box]

☐ 11 U.S.C. §522(b)(1): ☐ 11 U.S.C. §522(b)(2): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states. Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
Real Property Real estate located at: 3125- 19th Street Rockford IL	735 ILCS 5/12-901	15,000.00	124,000.00
Household Goods and Furnishings Misc. household goods and furnishings	735 ILCS 5/12-1001(b)	2,000.00	2,000.00
Wearing Apparel Clothing and personal items	735 ILCS 5/12-1001(a)	500.00	500.00
Interests in IRA, ERISA, Keogh, or Other Pension or Finterest in Profit Sharing Plan	Profit Sharing Plans 735 ILCS 5/12-1006	100%	Unknown
Automobiles, Trucks, Trailers, and Other Vehicles 2002 Pontiac Montana	735 ILCS 5/12-1001(c)	1,200.00	12,000.00
1997 Chevrolet Pickup Truck	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)	1,200.00 1,000.00	

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Page 9 of 25 Document

Form B6D (12/03)

In re	Bobby J Johnson,	Case No	
	Elna A Johnson		
-		Debtors ,	

#### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in more than one of these three

columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community		CONTI	UNLLQUL	P	AMOUNT OF	<u> </u>	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	NATURE OF LIEN, DESCRIPTION AND MARI OF PROPERTY	E CLAIM WAS INCURRED, ATURE OF LIEN, AND PTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN			DISPUTED	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY	
Account No.			2002 Pontiac Montana		Т	D A T E D				
AMCORE BANK, N.A. Attn: Marilyn Kiefer 1210 S. Alpine Road Rockford, IL 61108		J	Value \$	12,000.00				19,000.00	7,000.00	
Account No.			mortgage on real estate							
HOUSEHOLD MORTGAGE P.O. Box 2369 Brandon, FL 33509-2369		J								
	_		Value \$ 12	24,000.00	Ш			120,000.00	0.00	
Account No.			Value \$		-					
Account No.										
			Value \$							
0 continuation sheets attached	Subtotal (Total of this page) 139,000.00									
	Total (Report on Summary of Schedules)									

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Page 10 of 25 Document

Form B6E (04/04)

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	

#### Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

"Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules. ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,925\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, which ever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(3). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5). ☐ Deposits by individuals Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6). ☐ Alimony, Maintenance, or Support Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7). ☐ Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8). ☐ Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors

of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

<sup>\*</sup>Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 11 of 25

Form B6F (12/03)

In re	Bobby J Johnson,		Case No.	
	Elna A Johnson			
_		Debtors		

#### SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	Ų	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFE SO STATE	ONTINGE	NL QU LD	DISPUTED	AMOUNT OF CLAIM
Account No.			collections for: Rockford Gastroenterlogy Assoc.	٦×	T E		
ACCOUNT RECOVERY SERVICES, INC. 5183 Harlem Road Loves Park, IL 61111		J	and other misc. accounts		D		532.74
Account No.			collection for Rockford Health System & other				
ALLIED BUSINESS ACCOUNTS, INC. 300 1/2 South Second Street P.O. Box 1600 Clinton, IA 52733		J	misc. accounts				2,653.57
Account No. 5814107404			misc. charges		T	T	
AMOCO/BP P.O. Box 9014 Des Moines, IA 50368-9014		J					
Account No. 1477368812		-	marshandiaa	-		_	208.75
BERGNER'S P.O. Box 10327 Jackson, MS 39289-0327		J	merchandise				140.72
_3 continuation sheets attached	-		(Total of	Sub			3,535.78

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 12 of 25

Form B6F - Cont. (12/03)

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	

### SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Ç	U	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	L Q	ISPUTED	AMOUNT OF CLAIM
Account No.			misc. charges for the following accounts:	٦;	TE		
CAPITAL ONE P.O. Box 85015 Richmond, VA 23285-5015		J	#4388641860297527, #4862362525212836 and #5178052345580381		D		2,320.76
Account No.	╁		collections for: Swedish American and other misc.				2,020.70
DENNIS BREBNER & ASSOCIATES 860 Northpoint Blvd. Waukegan, IL 60085-8211		J	accounts				
							8,400.68
J.C. PENNEY P.O. Box 981131 El Paso, TX 79998		J	misc. charges				194.97
Account No. 0192348407			merchandise	t	T	t	
KOHL'S P.O. Box 3043 Milwaukee, WI 53201-3043		J					86.43
Account No.	$\dagger$	$\vdash$	medical				
NORTHERN ILLINOIS SCANNING P.O. Box 4073 Rockford, IL 61110-0573		J					1,816.53
Sheet no1 of _3 sheets attached to Schedule of		<u> </u>		<u> </u> Sub	tot	 al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				12,819.37

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 13 of 25

Form B6F - Cont. (12/03)

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	

### Debtors

### SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	l c		should Wife I hint or Occasionity	Tc	Lii	D	Γ
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGEN	DZLLQULDATE	SPUTED	AMOUNT OF CLAIM
Account No.			collections for: IHC Swedish American Hospital	Т	T E D		
OMNI CREDIT SERVICES 333 Bishops Way, Suite 100 Brookfield, WI 53005-6209		J	and other misc. accounts				82.60
Account No. 5440-4550-1373-4093			misc. charges	+			
ORCHARD BANK P.O. Box 80084 Salinas, CA 93912-0084		J					704.61
Account No. 1920066238	-		misc. charges	+			704.61
PHILLIPS 66 P.O. Box 9140 Des Moines, IA 50368-9140	•	J					192.18
Account No.	H		medical	+		$\vdash$	
R.T. MEDICAL SERVICES INC. P.O. Box 20630 Canton, OH 44701		J					31.23
Account No.	$\vdash$		medical	+		$\vdash$	01.20
RADIOLOGY CONSULTANTS ROCKFORD P.O. Box 4542 Rockford, IL 61110		J					476.00
Sheet no. 2 of 3 sheets attached to Schedule of		_		Sub			1,486.62
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)	1,700.02

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 14 of 25

Form B6F - Cont. (12/03)

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	

### SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CO	U	Ę	7	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NTINGEN	QULD	15	]	AMOUNT OF CLAIM
Account No.			medical	]⊤	A T E D		Ī	
ROCKFORD ASSOCIATED PATHOLOGISTS P.O. Box 15785 Rockford, IL 61132		J						876.60
Account No.			medical				1	
ROCKFORD GASTROENTEROLOGY ASSOC. 401 Roxbury Road Rockford, IL 61107-5078		J						1,399.00
Account No.	┢	$\vdash$	merchandise for the following accounts:	╁	┢	t	+	·
SEARS GOLD MASTERCARD P.O. Box 818007 Cleveland, OH 44181-8007		J	#5049948005624905 and #5121079707704828					
						L	_	1,194.65
Account No.  SWEDISH AMERICAN HOSPITAL 1401 Charles Street P.O. Box 4448 Rockford, IL 61110-0948		J	medical					14,438.38
Account No.								
Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  (Total of this page)							17,908.63	
2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.			(Report on Summary of So	7	[ota	al	Ī	35,750.40

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 15 of 25

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	

#### Debtors

### SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

<sup>0</sup> continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 16 of 25

In re	Bobby J Johnson,	Case No.
	Elna A Johnson	
-		Debtors
		SCHEDULE H. CODEBTORS
debto report imme	r in the schedules of creditors. Include	

NAME AND ADDRESS OF CREDITOR

NAME AND ADDRESS OF CODEBTOR

### Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 17 of 25

Form B6I (12/03)

In re	Bobby J Johnson Elna A Johnson		Case No.	
		Debtor(s)		

### SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether are not a joint position in filed purpose the appropriate and a joint position in filed purpose the appropriate and a joint position in filed purpose.

whether or not a joint petition is file	d, unless the spouses are separated and a joint	petition is n	ot filed	l <b>.</b>		
Debtor's Marital Status:	DEPENDENTS OF	DEBTOR A	AND S	POUSE		
Married	RELATIONSHIP None.	AG	E			
EMPLOYMENT	DEBTOR			SPOUSE		
Occupation		press ope	rator			
	OT EMPLOYED	FREEWA	Y ROC	KFORD INC.		
How long employed		28 yrs.				
Address of Employer		4701 Boei Rockford,				
INCOME: (Estimate of average m	onthly income)		D	EBTOR		SPOUSE
	y, and commissions (pro rate if not paid month	hly)	\$	0.00	\$	2,098.00
Estimated monthly overtime		• ,	\$	0.00	\$	0.00
SUBTOTAL			\$	0.00	\$	2,098.00
LESS PAYROLL DEDUCTION  a. Payroll taxes and social sectly b. Insurance c. Union dues d. Other (Specify)		<u>—</u>	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$	402.00 0.00 0.00 0.00 0.00
SUBTOTAL OF PAYROLL I	DEDUCTIONS	ſ	\$	0.00	\$	402.00
TOTAL NET MONTHLY TAKE	HOME PAY		\$	0.00	\$	1,696.00
Regular income from operation of l	ousiness or profession or farm (attach detailed	statement)	\$	0.00	\$	0.00
Income from real property			\$	0.00	\$	0.00
Interest and dividends			\$	0.00	\$	0.00
Alimony, maintenance or support p of dependents listed above Social security or other governmen	ayments payable to the debtor for the debtor's tassistance	use or that	\$	0.00	\$	0.00
(Specify) social security dis			\$	1,340.00	\$	0.00
	71 7		\$	0.00	\$	0.00
Pension or retirement income			\$	0.00	\$	0.00
Other monthly income (Specify)			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
TOTAL MONTHLY INCOME			\$	1,340.00	\$	1,696.00
TOTAL COMBINED MONTHLY	INCOME \$ 3,036	5.00	(Repor	rt also on Sum	mary o	of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

# Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 18 of 25

In re	Bobby J Johnson Elna A Johnson		Case No.	
		Debtor(s)		

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a sepexpenditures labeled "Spouse."  Rent or home mortgage payment (include lot rented for mobile home)  Are real estate taxes included?  Yes _X No	o rate any payments	,	Complete this schedule by estimating the average monthly expenses of the debtor and the debto bi-weekly, quarterly, semi-annually, or annually to show monthly rate.
Are real estate taxes included?  Is property insurance included?  Seption of the property insurance included?  Water and sewer Telephone Other  Home maintenance (repairs and upkeep)  Food Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments)  (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Segular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Segular expenses from operation of business, profession, or farm (attach detailed statement) Segular expenses from operation of business, profession, or farm (attach detailed statement)  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  Segular expenses from Segular expenses from Summary of Schedules)	parate schedule of	omplete a separate	
Are real estate taxes included?  Is property insurance included?  Is property insurance included?  Water and sewer Telephone Other Other  Home maintenance (repairs and upkeep)  Food Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Segular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	1,164.00	\$	or home mortgage payment (include lot rented for mobile home)
Is property insurance included? Yes X No Utilities: Electricity and heating fuel Water and sewer S Telephone S Telephone Other S Chother S Clothing S Chother S Charitable contributions S Charitable charita			
Utilities: Electricity and heating fuel Water and sewer Telephone Other Other Home maintenance (repairs and upkeep) Food Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc. Scharitable contributions Insurance (not deducted from wages or included in home mortgage payments) Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments) (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.) Auto Other Personal care items Other Schedules)  \$  S  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)			
Water and sewer Telephone Other Other Home maintenance (repairs and upkeep) Food Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc. Scharitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments) (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Schedules Schedules Schedules	175.00	\$	<u> </u>
Other Home maintenance (repairs and upkeep) Food Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc. Charitable contributions Insurance (not deducted from wages or included in home mortgage payments) Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments)  Specify Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.) Auto Other Spayments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Spayments (Report also on Summary of Schedules)  \$	35.00	\$	, ,
Other Home maintenance (repairs and upkeep) Food Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc. Charitable contributions Insurance (not deducted from wages or included in home mortgage payments) Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments)  Specify Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.) Auto Other Spayments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Spayments (Report also on Summary of Schedules)  \$	45.00	\$	Telephone
Food Clothing Slaundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc. Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments)  (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Personal care items Other Sampentses from operation of business, profession, or farm (attach detailed statement) Other Sampentses from operation of business, profession, or farm (attach detailed statement) Sampents for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Sampents for support of additional dependents on Summary of Schedules)  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$  Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support for home for the form of the form o	0.00	\$	
Food Clothing Slaundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc. Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's Life Health Auto Other Taxes (not deducted from wages or included in home mortgage payments)  (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Personal care items Other Sampentses from operation of business, profession, or farm (attach detailed statement) Other Sampentses from operation of business, profession, or farm (attach detailed statement) Sampents for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Sampents for support of additional dependents on Summary of Schedules)  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$  Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support of additional dependents not living at your home Sampents for support for home for the form of the form o	50.00	<u> </u>	e maintenance (renairs and unkeen)
Clothing Laundry and dry cleaning Medical and dental expenses Transportation (not including car payments) Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Segular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Other StotAL MONTHLY EXPENSES (Report also on Summary of Schedules)	400.00	\$ <del></del>	
Laundry and dry cleaning  Medical and dental expenses  Transportation (not including car payments)  Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions  Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other  Auto Other S  Alimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home  Regular expenses from operation of business, profession, or farm (attach detailed statement)  Other Personal care items  Other  S  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	75.00	\$ <del></del>	
Medical and dental expenses  Transportation (not including car payments)  Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions  Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Other Shamony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items  Other Shamony Shedules)  \$  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	40.00	\$ <del></del>	
Transportation (not including car payments)  Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions  Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other  Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Sayments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$  Sometimes of support of support of summary of Schedules)	150.00	\$ <del></del>	
Recreation, clubs and entertainment, newspapers, magazines, etc.  Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Other Other Other Other Other Personal care items Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$  Separation of the mortgage payments to be included in the plan.)  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$	150.00	\$	
Charitable contributions Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments) (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items STOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	100.00	\$ <del></del>	
Insurance (not deducted from wages or included in home mortgage payments)  Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments) (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items STOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	0.00	\$	
Homeowner's or renter's  Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments) (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Shimony of Schedules  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)		Ψ	
Life Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments) (Specify) Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Shimony of Schedules)  Shimony of Schedules	0.00	\$	
Health Auto Other  Taxes (not deducted from wages or included in home mortgage payments) (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items STOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	ф •	
Auto Other  Taxes (not deducted from wages or included in home mortgage payments) (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Alimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items  S  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	ф •	
Other  Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	80.00	ф 	
Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Shimony (attach detailed statement)	0.00	φ	
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other Shimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Shimony, maintenance, and support paid to others Shimony, maintena	0.00	<b>_</b> Ψ	
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)  Auto Other Other Other S Alimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items S Other TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	¢.	
Auto Other Other Other Other Alimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) S Other Personal care items S Other TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00		
Other Other Other Alimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	22.22		
Other Other Alimony, maintenance, and support paid to others Payments for support of additional dependents not living at your home Regular expenses from operation of business, profession, or farm (attach detailed statement) Other Personal care items S Other TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	80.00	\$	
Other  Alimony, maintenance, and support paid to others  Payments for support of additional dependents not living at your home  Regular expenses from operation of business, profession, or farm (attach detailed statement)  Other Personal care items  Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	_ \$	
Alimony, maintenance, and support paid to others  Payments for support of additional dependents not living at your home  Regular expenses from operation of business, profession, or farm (attach detailed statement)  Other Personal care items  Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	\$	
Payments for support of additional dependents not living at your home  Regular expenses from operation of business, profession, or farm (attach detailed statement)  Other Personal care items  Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00		Other
Regular expenses from operation of business, profession, or farm (attach detailed statement)  Other Personal care items  Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	\$	
Other Personal care items \$ Other TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules) \$  \$	0.00	\$	
Other  TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$	0.00	\$	
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)  \$\_\_\	40.00	\$	Personal care items
	0.00	\$	r
FOR CHAPTER 12 AND 13 DEBTORS ONLY]	2,584.00	\$	AL MONTHLY EXPENSES (Report also on Summary of Schedules)
Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, at other regular interval.  A. Total projected monthly income  B. Total projected monthly expenses  C. Excess income (A minus B)  D. Total amount to be paid into plan each  Monthly  Monthly			CHAPTER 12 AND 13 DEBTORS ONLY] de the information requested below, including whether plan payments are to be made bi-weekly regular interval.  Fotal projected monthly income Fotal projected monthly expenses Excess income (A minus B)

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 19 of 25

### **United States Bankruptcy Court Northern District of Illinois**

	Bobby J Johnson			
In re	Elna A Johnson		Case No.	
		Debtor(s)	Chapter	13

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <a href="https://docs.ncb/16">16</a> sheets [total shown on summary page plus 1], and that they are true and correct to the best of my knowledge, information, and belief.

Date	August 1, 2005	Signature	/s/ Bobby J Johnson Bobby J Johnson Debtor
Date	August 1, 2005	Signature	/s/ Elna A Johnson
			Elna A Johnson Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 20 of 25

Form 7 (12/03)

#### **United States Bankruptcy Court** Northern District of Illinois

In re	Bobby J Johnson Elna A Johnson		Case No.	
		Debtor(s)	Chapter	13

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Ouestions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None 

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$0.00	SOURCE (if more than one) Husband-2005
\$0.00	2004
\$0.00	2003
\$13,000.00	Wife-2005
\$27,000.00	2004
\$26,000.00	2003

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,340.00 Husband's social security disability benefits.

#### 3. Payments to creditors

None

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL
OF CREDITOR PAYMENTS AMOUNT PAID OWING

None b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or

not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

2

RELATIONSHIP TO DEBTOR DATE OF PAYMENT

AMOUNT PAID

OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR AND CASE NUMBER NATURE OF PROCEEDING AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE

DESCRIPTION AND VALUE OF

PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF REPOSSESSION,

NAME AND ADDRESS OF CREDITOR OR SELLER FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT

3

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

**PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 10. Other transfers

None

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

#### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Page 23 of 25 Document

#### 12. Safe deposit boxes

None 

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NATIONAL CITY BANK

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY debtors only

DESCRIPTION OF CONTENTS no contents

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

**PROPERTY** 

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 24 of 25

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

**GOVERNMENTAL UNIT** 

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

**GOVERNMENTAL UNIT** 

NOTICE

LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

> TAXPAYER I.D. NO. (EIN)

ADDRESS

**BEGINNING AND ENDING** 

NATURE OF BUSINESS DATES

NAME

NAME

None

**ADDRESS** 

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date August 1, 2005

Signature

/s/ Bobby J Johnson

Bobby J Johnson

Debtor

Date August 1, 2005

Signature

/s/ Elna A Johnson

Elna A Johnson

Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 05-73844 Doc 1 Filed 08/01/05 Entered 08/01/05 10:45:03 Desc Main Document Page 25 of 25
United States Bankruptcy Court
Northern District of Illinois

	Bobby J Johnson			
In re	Elna A Johnson		Case No.	
		Debtor(s)	Chapter	13

	DISC	CLOSURE O	F COMPENS	ATION OF ATTOR	NEY FOR	DEBTOR(S)	
1.	compensation paid to	me within one yea	r before the filing		or agreed to be	for the above-named debtor paid to me, for services rend s follows:	
	For legal service	s, I have agreed to a	accept		\$	2,700.00	
	Prior to the filing	g of this statement I	have received		\$	0.00	
	Balance Due				\$	2,700.00	
2.	\$ 30.00 of the fi	ling fee has been pa	aid.				
3.	The source of the com	pensation paid to r	ne was:				
	•	Debtor		Other (specify):			
4.	The source of comper	sation to be paid to	me is:				
	•	Debtor		Other (specify):			
5.	■ I have not agr	reed to share the ab	oove-disclosed com	ppensation with any other per	rson unless they	are members and associates	of my law
				sation with a person or person ses of the people sharing in the		members or associates of my is attached.	law firm.
6.	<ul> <li>a. Analysis of the del</li> <li>b. Preparation and file</li> <li>c. Representation of</li> <li>d. [Other provisions Negotiation agreements</li> </ul>	btor's financial situating of any petition, the debtor at the mass needed]  s with secured cr	ation, and rendering, schedules, statements, statements, statements, statements and ceditors to reduce	ent of affairs and plan which and confirmation hearing, and	rmining whethe may be required	r to file a petition in bankrupt;	cy;
_				paration and filing of motic	on planning; pi ns pursuant to	reparation and filing of rea 11 USC 522(f)(2)(A) for a	ffirmation voidance
7.	Representa		ve-disclosed fee do	paration and filing of motion best not include the following	ns pursuant to	reparation and filing of rea 11 USC 522(f)(2)(A) for a res, relief from stay action	voidance
7.	Representa	tion of the debto	ve-disclosed fee do ors in any discha	paration and filing of motion best not include the following	ns pursuant to	11 USC 522(f)(2)(A) for a	voidance
this	Representa other adver	tion of the debto sary proceeding.	ve-disclosed fee do ors in any discha	peraction and filing of motion of the person	ns pursuant to service: lien avoidand	11 USC 522(f)(2)(A) for a	voidance